Patent
Attorney's Docket No. 010055-134

PRADEMARK OFFICE

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|---|--|------------------------------------|--------------|--|--|--|--|
| IN THE UNITED STATES PATENT AND TRADEMARK OFFICE | | | | | | | |
| In re Pate | ent Application of |) BOX Fee Amendment | TH 31 | | | | |
| s | Simon C. BURTON et al. 18 2 8 100 EE |) Group Art Unit: 1651 | JAN 3 1 2002 | | | | |
| Application No.: 08/468,610 P. Weber, Ph.D. | | | | | | | |
| Filed: Ju | ne 6, 1995 |) | | | | | |
| | CHROMATOGRAPHIC RESINS AND METHOD FOR USING SAME |)))) | | | | | |
| REPLY TRANSMITTAL LETTER | | | | | | | |
| Assistant Commissioner for Patents Washington, D.C. 20231 | | | | | | | |
| Sir: | | | | | | | |
| Encl | osed is a reply for the above-identified pate | ent application. | | | | | |
| [X] | [X] A Petition for Extension of Time is also enclosed. | | | | | | |
| [] | A Terminal Disclaimer and a check for [] \$55.00 (248) [] \$110.00 (148) to cover the requisite Government fee are also enclosed. | | | | | | |
| [] | Also enclosed is | | | | | | |
| [] | Small entity status is hereby claimed. | | | | | | |
| [] | Applicant(s) request continued examination under 37 C.F.R. § 1.114 and enclose the [] \$370.00 (279) [] \$740.00 (179) fee due under 37 C.F.R. § 1.17(e). | | | | | | |
| | [] Applicant(s) previously submitted _ requested. | _, on, for which continued exami | nation is | | | | |
| [] | Applicant(s) request suspension of action by the Office until at least _, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed. | | | | | | |
| r ı | A Request for Entry and Consideration o | f Submission under 37 C F R 8 1 12 | 9(a) | | | | |

(146/246) is also enclosed.

No additional claim fee is required.

[X]

[] An additional claim fee is required, and is calculated as shown below:

| AMENDED CLAIMS | | | | | | |
|--|------------------|---|-----------------|-------------------|---------------|--|
| , | No. OF CLAIMS | HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR | EXTRA CLAIMS | RATE | ADDT'L FEE | |
| Total Claims | | MINUS = | | × \$18.00 (103) = | | |
| Independent Claims | | MINUS = | | × \$84.00 (102) = | | |
| If Amendment adds multiple dependent claims, add \$280.00 (104) | | | | | | |
| Total Amendment Fee | | | | | | |
| If small entity status is claimed, subtract 50% of Total Amendment Fee | | | | | | |
| TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT | | | | | | |

| ΙJ | A claim fee in the an | nount or \$ | is enclosed. |
|----|-----------------------|----------------------|--------------|
| [] | Charge \$ | to Deposit Account N | o. 02-4800. |

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17, 1.20(d) and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Jav F. Williams

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Date: January 28, 2002